

FINANCIAL AFFIDAVIT			
IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE			
IN UNITED STATES	MAGISTRATE	DISTRICT	<input type="checkbox"/> APPEALS COURT or <input type="checkbox"/> OTHER PANEL (Specify below)
IN THE CASE			
USA	V.S. <u>Sail Donette</u>	FOR AT	LOCATION NUMBER
PERSON REPRESENTED (Show your full name)		<div style="display: flex; justify-content: space-between;"> <div>           1 Defendant--Adult            2 Defendant - Juvenile            3 Appellant            4 Probation Violator            5 Parole Violator            6 <input type="checkbox"/> Habeas Petitioner            7 <input type="checkbox"/> 2255 Petitioner            8 <input type="checkbox"/> Material Witness            9 <input type="checkbox"/> Other         </div> <div style="border: 1px solid black; padding: 5px;">           DOCKET NUMBERS            Magistrate  <u>04-816-MB/3</u>            District Court            Court of Appeals         </div> </div>	
CHARGE/OFFENSE (describe if applicable & check box →) <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor			

## ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOYMENT	Are you now	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed																
	Name and address of employer:																	
	IF YES, how much do you earn per month? \$		IF NO, give month and year of last employment															
			How much did you earn per month? \$	<u>8/99 \$900/month</u>														
ASSETS	OTHER INCOME	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$															
		Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																
	CASH	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES																
		Have you any cash on hand or money in savings or checking accounts? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ <u>don't know *</u>																
PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No																	
	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">IF YES, GIVE THE VALUE AND \$ DESCRIBE IT</th> <th style="width: 10%;">VALUE</th> <th style="width: 50%;">DESCRIPTION</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>				IF YES, GIVE THE VALUE AND \$ DESCRIBE IT	VALUE	DESCRIPTION											
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OBLIGATIONS & DEBTS	MARITAL STATUS		Total No. of Dependents	List persons you actually support and your relationship to them														
	<input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED		0															
	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME:		Creditors	Total Debt													
		<u>Rent</u> <u>\$200/wk</u>		<u>\$200/wk</u>	<u>\$800.00</u>													

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

4/8/04SIGNATURE OF DEFENDANT  
(OR PERSON REPRESENTED)Sail Donette

Grandfather holds passport to account